

1052

Constitution

OF THE

AMERICAN HYGIENIC AND HYDROPATHIC ASSOCIATION

OF

PHYSICIANS AND SURGEONS:

TOGETHER WITH THE LIST OF

OFFICERS, STANDING COMMITTEES AND MEMBERS,

PROCEEDINGS OF THE

FIRST AND SECOND ANNUAL MEETINGS;

AND THE

FIRST ANNUAL REPORT OF THE COMMITTEE

ON HYGIENE.

319

~~~~~  
PUBLISHED BY ORDER OF THE ASSOCIATION.  
~~~~~

New York:

PUBLISHED BY FOWLERS AND WELLS,

Clinton Hall, No. 131 Nassau-street.

M DCCC LI.

Constitution
OF THE
AMERICAN HYGIENIC AND HYDROPATHIC ASSOCIATION
OF
PHYSICIANS AND SURGEONS:
TOGETHER WITH THE LIST OF
OFFICERS, STANDING COMMITTEES AND MEMBERS,
PROCEEDINGS OF THE
FIRST AND SECOND ANNUAL MEETINGS;
AND THE
FIRST ANNUAL REPORT OF THE COMMITTEE
ON HYGIENE.

~~~~~  
PUBLISHED BY ORDER OF THE ASSOCIATION.  
~~~~~

New York:
PUBLISHED BY FOWLERS AND WELLS,
Clinton Hall, No. 131 Nassau-street.

M DCCC LI.

~~~~~  
EDWARD O. JENKINS, PRINTER,  
No. 114 Nassau Street.

# Constitution

OF THE

AMERICAN HYGIENIC AND HYDROPATHIC ASSOCIATION .

OF

PHYSICIANS AND SURGEONS.

---

## PREAMBLE.

WE, the undersigned, physicians and surgeons, believing in the doctrine of the *vis medicatrix naturæ*, or the inherent tendency of the human constitution to free itself from disease ; and furthermore, that of all the remedial agents which the experience of ages has shown to be requisite to assist nature in her operations, WATER is by far the best, the safest, and most universal in its application ; do hereby agree to the following

## CONSTITUTION.

I.—This Association shall be styled “THE AMERICAN HYGIENIC AND HYDROPATHIC ASSOCIATION OF PHYSICIANS AND SURGEONS ;” and its objects shall be the diffusion of those physiological principles which are usually comprised under the term *Hygiene*, and the development of the therapeutic virtues of *Water* to their fullest extent, on a strictly rational and scientific basis, and with especial reference to the established laws of the human system, both in health and disease :—a proper regard being always paid to the various modifications which may from time to time result from the progressive advancement of medical science.

II.—Any physician residing in the United States of America, having received the decree of Doctor of Medicine, or a license to practise the



healing art, and who can exhibit satisfactory proofs of his competency to practise Hydropathy, may be elected a member of this Association by the votes of a majority of those present at an annual meeting.

III.—The officers of this Association shall be a President, two Vice-Presidents, a Secretary and a Treasurer, who shall severally exercise the functions pertaining to their respective offices. They shall also constitute an Executive Committee, whose duty it shall be to prepare business for the annual meeting; and any three of the officers aforesaid may form a quorum to do business as such committee.

IV.—The officers shall be elected at the annual meeting of the Association, by the votes of a majority of the members present. They shall serve for one year, or until their successors are chosen.

V.—There shall be a meeting of this Association annually, at such time and place as shall be determined on by the Executive Committee, and due notice given to each member beforehand, by the Secretary of the Association.

VI.—Special meetings may be convened by the Executive Committee whenever they may think it expedient.

VII.—The Constitution may be amended by a vote of two-thirds of the members present at the annual meeting; due notice of such amendment having been given at the previous annual meeting.

VIII.—This Association shall not legislate respecting the practice of its members: nor shall any rules be made respecting the ethics of medical practice.

IX.—A public oration shall be delivered before the Association on the evening of the first day of its annual meeting. An Orator and a substitute shall be selected at each annual meeting, for the year next ensuing; and in case both should be prevented from fulfilling the appointment, a substitute shall be designated by the Executive Committee.

X.—Two Standing Committees shall likewise be appointed by the Association at each annual meeting; one on *Hygiene*, and the other on *Hydropathy*. Each committee shall consist of three members, and it shall be the duty of each committee, at the close of its official year, to present a report at the annual meeting, of such facts and arguments as its members may deem proper.

XI.—A Committee on Credentials and Qualifications, composed of three members, shall likewise be appointed at each annual meeting, to serve for one year or until their successors are appointed, for the

purpose of examining the credentials and qualifications of candidates for membership. All nominations of candidates shall be first submitted to this committee, and the action of the Association upon all such nominations shall be based upon their report.

XII.—Each member of the Association shall pay to the Treasurer at each annual meeting the sum of two dollars, to be devoted to the payment of all necessary expenses of such meetings; the surplus (if any) to be paid into the treasury. Special assessments and appropriations shall only be made by a vote of three-fourths of the members present at the annual meeting at which such measure has been introduced. The meeting of June 19th, 1850, shall be deemed the first annual meeting of the Association, and the dues of members shall be payable to the Treasurer on that day.

XIII.—Honorary members of the Association may be elected at each annual meeting upon the recommendation of the Committee on Credentials and Qualifications. All such members shall be entitled to the privileges of membership except the right to vote, or to serve as officers of the Association.

# Officers for 1851-52.

---

## Executive Committee.

PRESIDENT,

BUTLER WILMARTH, M.D.

VICE-PRESIDENTS,

E. A. KITTREDGE, M.D.

JOEL SHEW, M.D.

SECRETARY,

ROLAND S. HOUGHTON, M.D.

TREASURER,

N. BEDORTHA, M.D.

---

## Standing Committees.

ON HYGIENE,

WILLIAM A. HAMILTON, M.D.

HUBBARD FOSTER, M.D.

LEVI REUBEN, M.D.

ON HYDROPATHY,

SETH ROGER3, M.D.

HENRY FOSTER, M.D.

CHARLES MUNDE, M.D.

ON CREDENTIALS AND QUALIFICATIONS.

R. S. HOUGHTON, M.D.

JOSEPH A. WEDER, M.D.

S. O. GLEASON, M.D.



# List of Members.

---

## *New-York.*

- LOWREY BARNEY, M.D., of *Henderson*.  
BUTLER WILMARTH, M.D., of *New Graefenberg*.  
WILLIAM A. HAMILTON, M.D., of *Saratoga*.  
N. BEDORTHA, M.D., of *Troy*.  
HENRY FOSTER, M.D., of *Clifton Springs*.  
LEVI REUBEN, M.D., of *Rochester*.  
S. O. GLEASON, M.D., of *Forest City*.  
P. H. HAYES, M.D., of *Wyoming*.  
CLEMENT B. BARRETT, M.D., of *Binghamton*.  
JOEL SHEW, M.D., of *New York City*.  
R. T. TRALL, M.D., of *New York City*.  
T. L. NICHOLS, M.D., of *New York City*.  
R. S. HOUGHTON, M.D., of *New York City*.

## *Massachusetts.*

- CHARLES MUNDE, M.D., of *Northampton*.  
HUBBARD FOSTER, M.D., of *Lowell*.  
E. A. KITTREDGE, M.D., of *Boston*.  
SETH ROGERS, M.D., of *Worcester*.  
C. C. FIELD, M.D., of *Leominster*.

## *New Jersey.*

- JOSEPH A. WEDER, M.D., of *South Orange*.

## *Pennsylvania.*

- C. C. SCHIEFERDECKER, M.D., of *Willow Grove*.

## *Georgia.*

- T. C. COYLE, M. D., of *Milledgeville*.

## *Ohio.*

- T. T. SEELYE, M.D., of *Cleveland*.

## First Annual Meeting.

---

Pursuant to a call to that effect, which appeared in the June number of *The Water Cure Reporter*, a Hydropathic Convention was held at Hope Chapel, New York City, on *Wednesday, June 19th, 1850*, for the purpose of organizing a National Association. At half past ten, A.M., Dr. WILLIAM A. HAMILTON, of Saratoga, was called to the chair, and Dr. LEVI REUBEN, of New Graefenberg, appointed Secretary. The following physicians were present at the meeting:

### *New York.*

LOWREY BARNEY, M.D., of Henderson.  
WILLIAM A. HAMILTON, M.D., of Saratoga.  
N. BEDORTHA, M.D., of New Lebanon.  
HENRY FOSTER, M.D., of New Graefenberg.  
LEVI REUBEN, M.D., of New Graefenberg.  
S. O. GLEASON, M.D., of Glen Haven.  
JOEL SHEW, M.D., of New York City.  
R. T. TRALL, M.D., of New York City.  
T. L. NICHOLS, M.D., of New York City.  
H. B. SHEPPARD, M.D., of New York City.  
R. S. HOUGHTON, M.D., of New York City.

### *Massachusetts.*

BUTLER WILMARTH, M.D., of Hopedale.  
HUBBARD FOSTER, M.D., of Lowell.

### *New Jersey.*

JOSEPH A. WEDER, M.D., of Parkeville.

### *Pennsylvania.*

C. C. SCHIEFERDECKER, M.D., of Willow Grove.

### *Georgia.*

T. C. COYLE, M.D., of Milledgeville.

Letters of encouragement and sympathy were read from (or on the part of) the following physicians:

*Massachusetts.*

CHARLES MUNDE, M.D., of Northampton.

SETH ROGERS, M.D., of Worcester.

*New York.*

P. H. HAYES, M.D., of Cuba.

*Ohio.*

T. T. SEELYE, M.D., of Cleveland.

*Maine.*

CARL LORENZ, M.D., of Waterford.

At this stage of the proceedings, Dr. SCHIEFERDECKER called for a definition of the term "Hydropathy." He would have preferred the term "Hydriatics," as would some others present.

Dr. HOUGHTON said, in reply, that he considered it hard to change established names, even for the better. He explained that, in his opinion, "Hydropathy" was preferable as a term by which to designate the water-practice, from its being already in almost universal use.

On motion, a committee of three was ordered to be appointed for the purpose of nominating officers for the day. Drs. BEDORTHA, HOUGHTON and SHEW were appointed that committee.

Dr. SCHIEFERDECKER objected to putting, as he declared they had done, two prominent *Grahamites* upon so important a committee, in the very outset of business.

Dr. BARNEY made some remarks in reply. From a few promiscuous remarks which followed, it seemed to be generally admitted that the meeting had nothing whatever to do with Grahamism, Mesmerism, or any other distinct *ism* of the day; that it did not intend to sanction, or take any action on those *isms*; and that they were separate, and, in relation to Hydropathy, entirely irrelevant matters.

The Committee, after retiring for deliberation, reported the following nominations, which were adopted by the Convention:

*For President,* JOEL SHEW, M.D.

*For Vice Presidents,* { BUTLER WILMARTH, M.D.  
                                  { HUBBARD FOSTER, M.D.

*For Secretaries,* { T. L. NICHOLS, M.D.  
                          { LEVI REUBEN, M.D.

On motion of Dr. HOUGHTON, a committee of three was ordered to be appointed to draft a Constitution for an American Hydropathic Society. Drs. HOUGHTON, BEDORTHA and HAMILTON were appointed as such committee; who, after having retired for deliberation, reported a draft for the action of the Convention.

On motion, it was voted to take up each article separately, and to consider for the present the less important, reserving those which seemed likely to cause debate until the afternoon session. The Preamble, and Articles 3, 6, 8, 9, 10, 11 and 13 were unanimously adopted. Articles 1, 2, 4, 5, 7, and 12 were laid over, and the meeting adjourned to 3 o'clock, P.M.

#### AFTERNOON SESSION.

The Convention was called to order at 3½ P.M., by the PRESIDENT; and Art. 7 was taken up. On motion, it was amended by adding the final clause, "*due notice of such amendment having been given at the previous annual meeting,*" and then adopted as amended.

Art. 5. Dr. WILMARTH objected to the fixing of the time, "May," and the place, "*New York City,*" and moved to amend by striking out the same and inserting "*such time and place as shall be determined on by the Executive Committee.*" Amendment carried, and the Article then adopted.

Art. 4. Objection made and withdrawn. Adopted.

Art. 1. Adopted without dissent.

Art. 12. Dr. NICHOLS objected to the proposed annual dues of members (\$1) as too small, and moved to substitute \$2. Carried.

Dr. REUBEN raised an objection to the appropriation of the annual dues solely to the payment of the yearly expenses, and moved to amend by inserting "*the surplus (if any) to be paid into the treasury.*" Carried, and the amended article adopted.

Art. 2. It was objected that by the provisions of this Article, Allopathists, Homœopathists, Eclectics, &c., must decide, in all cases, the right of applicants to membership in the Association. Dr. HOUGHTON replied on the danger of not taking *definite and high ground* on this subject. A very spirited debate ensued.

A motion was made to amend the article as reported by the committee, by inserting "*and who can exhibit satisfactory proofs of his competency to practise Hydropathy.*" The motion having been seconded and stated to the meeting,

Dr. NICHOLS moved to amend the amendment by substituting "*or*" for "*and*," so that the second article of the Constitution should read as follows:—

Any physician residing in the United States of America, having received the degree of Doctor of Medicine, or a license to practise the healing art, or *who can exhibit satisfactory proofs of his competency to practise Hydropathy*, may be elected a member of this Association by the votes of a majority of those present at an annual meeting.

After a spirited debate, in which Drs. BARNEY, HENRY FOSTER, SHEW, GLEASON, HOUGHTON, BEDORTHA, HAMILTON, NICHOLS, COYLE, WILMARTH and REUBEN took part, the vote was taken by yeas and nays on Dr. Nichols' amendment, and it was *lost*, as follows:—

*Yeas*—Drs. NICHOLS, WILMARTH and REUBEN—3.

*Nays*—Drs. BARNEY, BEDORTHA, HAMILTON, HOUGHTON, HUBBARD FOSTER, HENRY FOSTER, GLEASON, WEDER and COYLE—9.

The original amendment was then put and unanimously adopted; and the article as amended was then adopted in like manner:

The whole Constitution was then declared ADOPTED.

On motion, a committee of three was then ordered to be appointed for the purpose of nominating Officers and Standing Committees for the ensuing year. Drs. SHEW, BEDORTHA and HENRY FOSTER were appointed as such committee; who, after having retired for deliberation, came in and reported the following names,

*For Officers :*

*For President,* LOWREY BARNEY, M.D.

*For Vice-Presidents,* { CHARLES MUNDE, M.D.,  
T. T. SEELYE, M.D.

*For Secretary,* T. L. NICHOLS, M.D.

*For Treasurer,* R. T. TRALL, M.D.

*For Standing Committees.*

*On Hygiene,* { R. S. HOUGHTON, M.D.,  
E. A. KITTREDGE, M.D.,  
HUBBARD FOSTER, M.D.

*On Hydropathy,* { S. O. GLEASON, M.D.,  
BUTLER WILMARTH, M.D.  
T. C. COYLE, M.D.

*On Credentials*  
*and*  
*Qualifications,* { JOEL SHEW, M.D.,  
WM. A. HAMILTON, M.D.,  
N. BEDORTHA, M.D.



The nominations were unanimously confirmed by the Convention.

On motion of Dr. NICHOLS, a committee of three was ordered to be appointed to prepare an "*Address of the Convention to the American People.*" Drs. NICHOLS, HOUGHTON and SHEW were appointed as such committee.

Dr. S. O. GLEASON, of Glen Haven, was chosen Orator for the next annual meeting, and Dr. T. L. NICHOLS, of New York, Substitute.

On motion, it was ordered that the proceedings of the Convention be published in *The Water-Cure Journal* and *The Water-Cure Reporter*.

Dr. WILMARTH gave notice that he should, at the next annual meeting, move to amend the Constitution by substituting "*or*" for "*and*" in the contested clause of *Art. 2*.

On motion, the Convention then adjourned to 7½ P.M.

#### EVENING SESSION.

*Public Meeting.*—In accordance with previous arrangements, a public meeting was held at Hope Chapel in the evening, at which addresses were delivered by Dr. R. S. HOUGHTON and Dr. T. L. NICHOLS, in presence of a highly respectable and intelligent audience.

After the close of the public exercises, the members of the Convention remained in session a short time longer for the completion of their business (chiefly informal). On motion, the Convention then adjourned *sine die*.

## Second Annual Meeting.

---

PURSUANT to public notice, the second annual meeting of *The American Hygienic and Hydropathic Association of Physicians and Surgeons* was held at Hope Chapel, New York, on Friday, May 9th, 1851. The President, Vice Presidents, and Secretary, being absent, the convention was called to order at 10½, A. M., by the Treasurer, Dr. R. T. TRALL. Dr. WILLIAM A. HAMILTON, of Saratoga, was then elected President *pro tem.*, and Dr. R. S. HOUGHTON, of New York, Secretary *pro tem.* Upon calling the roll, it appeared that the following members were present:

WILLIAM A. HAMILTON, M.D., of Saratoga.  
BUTLER WILMARTH, M.D., of New Graefenberg.  
N. BEDORTHA, M.D., of Troy.  
JOEL SHEW, M.D., of New York city.  
R. T. TRALL, M.D., of New York city.  
JOSEPH A. WEDER, M.D., of South Orange, N. J.  
SETH ROGERS, M.D., of Worcester, Mass.;  
R. S. HOUGHTON, M.D., of New York city.

There were also in attendance, CLEMENT B. BARRETT, M. D., of Binghamton, N. Y.; C. C. FIELD, M. D., of Leominster, Mass.; Dr. WILLIAM E. ROGERS, of Crystal Lake, Susquehanna county, Penn.; Dr. C. K. BROADBENT, of Providence, R. I.; and several others whose names were not ascertained.

On motion of Dr. HOUGHTON, the following was adopted as the *Regular Order of the business of the Convention*:

1. Call to order by the President.
2. Call of the Roll by the Secretary.
3. Reading of the Journal of the last preceding meeting
4. Report of the Treasurer.
5. Report of the Committee on Hygiene.
6. Report of the Committee on Hydropathy.

6. Report of the Committee on Credentials and Qualifications.
8. Election of new members.
9. Election of honorary members.
10. Election of officers for the ensuing year.
11. Election of standing committees.
12. Collection of dues from members.
13. Extraordinary business (if any).

The Journal of the first annual meeting of the Association was then read by the Secretary; after which the Treasurer's Report was presented, as follows:

#### REPORT OF THE TREASURER.

The Treasurer of the American Hygienic and Hydropathic Association of Physicians and Surgeons, at the close of his term of office, respectfully submits the following report:

The *receipts* on account of the Association have been as follows, from the 19th of June, 1850, up to the present date:

|                 |                              | <i>Members' Dues.</i> |   |   |   |   |         |
|-----------------|------------------------------|-----------------------|---|---|---|---|---------|
| From            | Lowrey Barney, M. D.,        | -                     | - | - | - | - | \$2 00  |
| "               | Joel Shew, M. D.,            | -                     | - | - | - | - | 2 00    |
| "               | T. L. Nichols, M. D.,        | -                     | - | - | - | - | 2 00    |
| "               | R. S. Houghton, M. D.,       | -                     | - | - | - | - | 2 00    |
| "               | S. O. Gleason, M. D.         | -                     | - | - | - | - | 2 00    |
| "               | Levi Reuben, M. D.,          | -                     | - | - | - | - | 2 00    |
| "               | Hubbard Foster, M. D.,       | -                     | - | - | - | - | 2 00    |
| "               | Henry Foster, M. D.,         | -                     | - | - | - | - | 2 00    |
| "               | William A. Hamilton, M. D.,  | -                     | - | - | - | - | 2 00    |
| "               | Butler Wilmarth, M. D.,      | -                     | - | - | - | - | 2 00    |
| "               | N. Bedortha, M. D.,          | -                     | - | - | - | - | 2 00    |
| "               | Joseph A. Weder, M. D.,      | -                     | - | - | - | - | 2 00    |
| "               | C. C. Schieferdecker, M. D., | -                     | - | - | - | - | 2 00    |
| "               | T. C. Coyle, M. D.,          | -                     | - | - | - | - | 2 00    |
| "               | Seth Rogers, M. D.,          | -                     | - | - | - | - | 2 00    |
| "               | R. T. Trall, M. D.,          | -                     | - | - | - | - | 2 00    |
| Total receipts, |                              |                       |   |   |   |   | \$32 00 |

The *expenses* of the Association during the same period have been as follows:

|                                           |         |
|-------------------------------------------|---------|
| For rent of Hope Chapel, June 19th, 1850, | \$18 00 |
| " advertising previous to " " "           | 2 00    |
| Total expenses,                           | \$20 00 |
| Balance in the Treasurer's hands,         | \$12 00 |

Your Treasurer has also to state that, on the 19th of June, 1850, the sum of eight dollars was paid to Dr. Houghton, Treasurer *pro tem.*, as members' dues, by C. K. Broadbent, Lovias D. Towsley, F. W. Meyer, and W. P. Collins. Inasmuch as the question of the eligibility of these gentlemen to membership in the Association was one which the Treasurer *pro tem.* was not competent to act upon, he felt it to be his duty to report the facts in the case to the Committee on Credentials and Qualifications, and to deposit in their hands the before-mentioned sum of eight dollars, subject to the decision of the case to be made at the second annual meeting.

All of which is respectfully submitted.

R. T. TRALL, *Treasurer.*

New York, May 9th, 1851.

On motion, the report was accepted.

Dr. HOUGHTON, from the Committee on *Hygiene*, then read a Report, which, on motion, was accepted, and ordered to be published.

The Committee on *Hydropathy* failed to report.

[At this stage of the proceedings, Dr. SHEW, by request, read portions of a letter from Dr. T. CARLETON COYLE, of Georgia (a member of that Committee), regretting his inability to be present, and expressing the hope that the Association would fully maintain the high ground it had occupied at its first annual meeting.]

The Committee on Credentials and Qualifications, not being quite ready to report, were, on motion, allowed further time.

On motion of Dr. BEDORTHA, it was *ordered* that a Committee of three be appointed by the chair to nominate officers for the ensuing year. The chair accordingly appointed Drs. BEDORTHA, TRALL and SHEW. After having retired for deliberation, the Committee returned and reported the following names:

*For President*,—BUTLER WILMARTH, M.D.

*For Vice-Presidents*, { E. A. KITTEDGE, M.D.  
JOEL SHEW, M.D.

*For Secretary*,—R. S. HOUGHTON, M.D.

*For Treasurer*,—N. BEDORTHA, M.D.

The question being taken on each name separately, all the nominations were unanimously confirmed by the Association.

On motion, it was then *ordered* that a Committee of three be appointed by the chair to nominate Standing Committees for the ensuing

year. The chair accordingly appointed Drs. WILMARTH, ROGERS, and WEDER, who, after having retired for deliberation, returned and reported the following names:

*For Committee* { WM. A. HAMILTON, M.D.,  
                   *on*        { HUBBARD FOSTER, M.D.,  
                   *Hygiene.* { LEVI REUBEN, M.D.

*For Committee* { SETH ROGERS, M.D.,  
                   *on*        { HENRY FOSTER, M.D.,  
                   *Hydropathy.* { CHARLES MUNDE, M.D.

*For Committee* { R. S. HOUGHTON, M.D.,  
                   *on*        { JOSEPH A. WEDER, M.D.,  
                   *Cred. and Qual.* { S. O. GLEASON, M.D.

The nominations were unanimously confirmed by the Association.

Dr. SHEW, from the Committee on Credentials and Qualifications, then read the following letter :

NEW YORK, June 19th, 1850.

TO JOEL SHEW, M.D., W. A. HAMILTON, M.D., N. BEDORTHA, M.D.,  
*Committee on Credentials and Qualifications of the American  
 Hygienic and Hydropathic Association of Physicians and Surgeons.*

GENTLEMEN,—At the close of the meeting of our Association, this day held, and during the collection of the members' dues, the sum of two dollars was paid to me by each of the following gentlemen :

Dr. C. K. BROADBENT, of Providence, R. I.

Mr. LOVIAS D. TOWSLEY, of New York City.

Mr. F. W. MEYER, of New York City.

Mr. W. P. COLLINS, of North Providence, R. I.

Inasmuch as Dr. BROADBENT himself raised the question of his eligibility to membership, on the ground that he was not a graduated or licensed "physician and surgeon," although at too late a stage of the proceedings of the Convention for his case to be acted upon conclusively ; and inasmuch as the three remaining names were not upon either the call for the Convention, or upon the roll called this day ; and lastly, inasmuch as the Constitution of our Association refers to your Committee all questions connected with the credentials and qualifications of its members, I have felt it to be my duty to enclose to you the amount of the fees paid to me by the four gentlemen above-named, accompanied by this statement, and to request you to report on the subject at the next annual meeting.

Respectfully, yours,

R. S. HOUGHTON, M.D., *Acting Treasurer.*



In behalf of the committee, Dr. SHEW reported that the four gentlemen above-named did not possess the necessary qualifications for membership.

On motion of Dr. TRALL, the report was unanimously concurred in by the Association.

Dr. SHEW, in behalf of the same committee, reported favorably on the following nominations for membership:—CLEMENT B. BARRETT, M. D., of Binghamton, N. Y.; and C. C. FIELD, M. D., of Leominster, Mass.

On motion, the report was concurred in, and Drs. BARRETT and FIELD were declared to be duly elected members of the Association.

Dr. SHEW, in behalf of the same committee, then proposed the following gentlemen as honorary members:—Dr. C. K. BROADBENT, and Messrs. L. D. TOWSLEY, F. W. MEYER, and W. P. COLLINS. The vote being taken, the chair decided that the gentlemen were duly elected honorary members.

Dr. BROADBENT here announced that he declined an honorary membership; whereupon, on motion of Dr. TRALL, he was granted leave to withdraw; and, the sum of two dollars having been immediately refunded, Dr. BROADBENT accordingly withdrew from the convention.

On motion, the following were also duly elected honorary members of the Association:—Dr. WILLIAM E. ROGERS, of Crystal Lake, Susquehanna county, Penn.; Mr. WILLIAM T. VAIL, of Blooming Grove, Orange county, N. Y.; Mr. SAMUEL T. WOODWARD; Mrs. MARY S. GOVE NICHOLS, of New York city; Mrs. S. O. GLEASON, of Forest City, N. Y., and Mrs. L. N. FOWLER, M. D., of New York city.

On motion of Dr. TRALL, the Secretary was directed to furnish a copy of the proceedings of the Association, and of the Report of the Committee on Hygiene, for publication in the *Water-Cure Journal*.

The amendment of the Constitution proposed at the first annual meeting (namely, to substitute “or” for “and” in the second section, so that it should read “or who shall exhibit,” etc., etc.), was then called up, and after a few remarks from Drs. WILMARTH and SHEW, put to the vote and *rejected*—receiving only one vote. So the section remains unchanged.

On motion of Dr. HOUGHTON, it was *ordered* that each member of the Association be requested to transmit to the Chairman of the Committee on Hydropathy (Dr. SETH ROGERS, of Worcester, Mass.), *before* the next annual meeting, a full report of a case treated under his own supervision, embracing the principal details of the diagnosis and treat-

ment; to the end that the various cases so transmitted might be incorporated in the Report of the said Committee on Hydropathy to be presented at the next annual meeting.

On motion, the Secretary was directed to prepare a copy of the Proceedings of the Convention, together with the Report of the Committee on Hygiene, Constitution of the Association, List of Officers, Standing Committees, Members, etc., for publication in convenient pamphlet form; and authorized to draw on the surplus funds in the Treasurer's hands, to defray all necessary expenses of such publication.

On motion, the Association then adjourned until 7½, P. M.

### EVENING SESSION.

*Public Meeting.*—On re-assembling in the evening, it appeared that Dr. S. O. GLEASON, of Forest City, the Orator-elect, and Dr. NICHOLS, of New York, his substitute, were both absent. Dr. WILMARTH, of New Graefenberg, the President-elect, then came forward, and after announcing the fact to the audience which had gathered for the occasion, proceeded to address them, upon the spur of the moment, substantially as follows:—

I have practised medicine twenty years after the ALLOPATHIC method, and four years according to the method termed HYDROPATHIC. My preceptor taught me to give large doses of medicine, especially in acute diseases. I gave a great amount of medicine in many cases. In Dysentery, 30 to 60 grs. of Calomel, a large tablespoonful of Castor Oil, and 20 drops of Laudanum, was thought a proper dose for an adult, once in 24 hours. I have known 20 grs. of Calomel and 20 of Jalap given to a scrofulous infant under one year of age! I have frequently given half that quantity in similar cases; I did it conscientiously, but I saw the fatal consequences and abandoned that practice long ago.

The first I heard of the Water-Cure, was from an editorial of Mrs. L. M. Child, in the Anti-Slavery Standard, some ten years ago, giving an account of Priessnitz' Establishment, his extraordinary success, &c. I must say, at that time I was really provoked at it, and did not believe it a fair statement; I thought *his* patients were not *very* sick; in short, I believed that the whole thing was a humbug. I lived at that time in Leverett, Franklin Co., Mass. Soon after that, I moved to Milford, Worcester Co., Mass., and joined the Hopedale Community of Christian Non-Resistants, who were by-the-by, for *reform* in medicine

as well as morals. I passed very well as a Physician for 2 or 3 years. Now and then, I read something upon the subject of the *Water-Cure*; for instance, BULWER'S *Letter*, BALBIRNIE'S *Philosophy of the Water-Cure*, &c.; but I grew more and more provoked about it, though I could not help seeing a great remedial principle in the system. This was what provoked me; that I MUST UNLEARN MY ERRORS, and learn my practice again (of an illiterate Peasant, too). I felt just as I have, while reading essays on the deleterious effects of tobacco, before I had resolved to discontinue its use (a practice, I may say here, which should never be begun). I know the Essayist told the truth; and so it was with the Water-Cure. I foresaw the flood that was to wash away the long list of poisonous drugs I thought so much of as medicinal agents. Well, I soon had a trial. One of my best friends had a fine little boy, an only child, who chanced to be taken severely sick, with dysentery. He called me, of course, as medical adviser. "What shall I do, Doctor?" "Give a dose of Calomel, Oil and Laudanum." "Don't like to give Calomel." "Well, that is the best thing you can do." But I could not make him believe it. He sent for a Mr. Whitmarsh, of Boston, a Water-Cure Doctor of very limited practice at that time. He came, and to my great surprise, arrested the complaint in a few days, with nothing but *water* and *abstinence*. This made me feel cheap. I foresaw I must reform as well as my neighbors, or if nothing worse befel me, my "occupation" would be "gone." About that time, I read "*Johnson on Hydropathy*," "*Results of the Water Cure*," &c. I began to be convinced. To set the matter at rest, and also happening to need medical aid myself, from some quarter or other, I went to Messrs. Campbell's excellent establishment, at New Lebanon, N. Y. My good friend Dr. BEDORTH was the resident physician. I did not tell them what my profession was, for three or four weeks. I desired, first, an unbiased examination and prognosis in my own case; and, second, to scrutinize the operation of the water processes, unwatched myself. Accordingly I conversed with patients about their respective ailments, took a list of some 20 cases, their symptoms, treatment, and the effects thereof. I looked sharp for humbuggery, but could not find it. All was open, candid, philosophical, and in a good degree successful. After I became willing to be at peace with the Water-Cure, I learned fast, or rather unlearned some of my errors, and made confession of my former barbarous practice. Receiving and seeing so much benefit from the Water-Cure, in the short space of eight weeks, I became about five-eighths converted to it.

How could I help it if I meant to be honest? Professional pride and a deference to high medical authority, had blinded me, as, they now do many others. But, HYDROPATHY has continued to wash away these refuges, until now, at this present time, I may be set down about seven-eighths Hydriatric. I have abandoned the use of all corrosive and irritating poisons for medicine; I have no use for calomel in Dysentery, and would not consent to have it given in any case. So of Tartar Emetic, &c., &c.

I believe mild medicines may do good, under some circumstances. I use some of the milder tonics in cases of great debility and want of blood. I believe there may be cases where the laxity of the nervous and muscular system is so great, the vital power so deficient, that the stomach is not capable of contractility sufficient to secrete gastric juice, excite appetite, &c., so as to replenish the system with its own natural stimulus, viz., nutriment. I believe the needed contractility, in some cases of congestion, (not in inflammation) may be induced by mild stimulants, tonics, and astringents, thereby preventing the decomposition of the fluids and solids, and ultimate dissolution. But in all ordinary cases where I have conveniencies for Hydriatric treatment, and the confidence of the patient, I have no use for medicine. I take none myself, though I am often ill, and once took medicine freely. I have learned a "more excellent way."

One great error in Allopathy is, making the stomach and bowels the critical organs, by violence. This is certainly very unphilosophical, to force a crisis upon one organ and compel it to carry off *all* the effete matter of the system, when nature designed it to carry only about one-eighth. This practice induces chronic inflammation of the mucous membranes of the bowels, &c. I once knew an almost incurable case of chronic diarrhœa, emaciation, debility, &c., induced by a single dose of "*Sherman's Worm Lozenges*," so highly lauded on placards, &c. The diarrhœa lasted about one year, and was cured with great difficulty, under a mixed treatment of Hydropathy and astringent medicine. These lozenges are chiefly composed of Calomel and Loaf Sugar; a precious panacea, to scatter broadcast over the land for children to eat as they would sweetmeats! The latter are bad enough, but the former are abominable. The patient alluded to was a respectable young lady, who not only lost a year's time, but nearly her life. Great caution should be exercised in the use of medicine, if used at all.

So also with water. Many use too heavy treatment, too many

baths, and at too low a temperature. This is a great error. Patients reason falsely about treatment, like the man who took physic: "If two baths per day will do good, four will do twice as much good." Physicians should never yield to the importunities of patients in this matter, but nicely weigh and measure the amount of vitality of each case. If reaction takes place readily, the baths may be increased in number, and the temperature lowered with safety; but if reaction is slow and feeble, the baths must be tepid and few. To give frequent and cold baths in such cases, would either lash the nervous system into fury and the mind into insanity, or overwhelm it with depression, and cause nearly, or quite, fatal congestion in some one or more vital organ. I have seen all these effects from too cold, too frequent and too heavy baths in the forepart of a course of treatment, before the system was prepared for it by a gentle, tepid, coercing process. It takes a long time to recover one of these knocked-down cases to the use of water again. Therefore we should be *careful*, especially in the *commencement* of a Hydriatic course. If the patient is too hot, *cool* him; if too cold, *warm* him.

This is plain common sense.

But it is *not* common sense to let a patient lie quivering in the wet sheet for hours; if he does not get warm within *one* hour, he is not in a condition for wet packing. Neither should a patient with feeble powers be driven about in the cold air, or kept in a cold room, with hands and feet cold and blue as a lean pigeon. No patient can improve under such circumstances. They may stay longer at an establishment, if their faith fail not; but it is no credit to it, nor the physician who prescribes or allows such treatment.

Our chief reliance for success consists in the proper direction and management of the vital forces and THE MEDICAL POWER OF NATURE; we must not waste this power, for we cannot create it—we can only aid and direct it. Too cold treatment exhausts by depression, or excessive reaction. Too much water conducts too much electricity from the system. Disease is radically removed by a change of matter; the old morbid particles are cast out, and new, healthy particles supplied. This change corresponds to the vital power of the system. If vitality abounds, the change will be rapid, as in acute diseases; if feeble, it will be slow, as in chronic cases. The water-cure greatly facilitates and increases this change, by increasing the demand for food, enhancing the vital forces, setting in motion all the secretions and excretions, especially that great excreting organ, the skin, designed



by nature to expel about five-eighths of all the worn-out and effete matter of the body. When the water-cure can be fully and properly applied, it places the organism in the best possible condition to operate and restore itself to health again. This is all we can do; we cannot directly create vital power by any mode of treatment. The great natural agents, food, air, water, exercise, rest, &c., must do that. Our mission is a limited one, but highly responsible; for although we cannot create health, we may, by injudicious treatment, destroy it.

The cause of Hydropathy is progressing fast in Massachusetts. The *Water-Cure Journal* circulates widely in that State; much more widely than it did three years ago. There has been a great change in several towns within the circle of my practice in the last two years. Many families that formerly were frightened half out of their senses at every symptom of disease, and ran for a doctor with all speed, have learned that *rest, pure air, bathing* and *abstinence*, in all ordinary cases, are far better remedies than poisonous drugging.

But we are in our infancy, yet, in the healing art. I am still open to conviction, and willing to learn. Truth, *practical* truth, should be our object, independent of all preconceived theories and speculations

At the close of Dr. WILMARTH's address, remarks elicited by the occasion were made by Drs. SHEW, TRALL, HAMILTON, and others; after which the public meeting was dissolved.

The members of the Association remained in session a short time longer, for the purpose of completing their business. Dr. WILLIAM A. HAMILTON, of Saratoga, was elected Orator for 1852, and Dr. N. BEDORTHA, of Troy, substitute. It was then suggested, and informally agreed to, that the members of the Association correspond with each other, in due time, with reference to the time and place of holding the next annual meeting, with the view to ensuring a more general attendance.

On motion, the Association then adjourned *sine die*.

*Attest:*

ROLAND S. HOUGHTON, M. D.,

*Secretary.*

## REPORT OF THE COMMITTEE ON HYGIENE.

THE Committee appointed on the 19th day of June, 1850, on the subject of HYGIENE, and charged by the Constitution (ART. X.) with the duty of presenting a report at the annual meeting held at the close of its official year, of such facts and arguments as its members may deem proper, have considered the subject referred to them as well as their various other engagements would allow, and respectfully submit the following

## REPORT.

We understand by the term HYGIENE, that department of medical science which relates to the preservation of health and the prevention of disease. Perhaps the most natural division of the subject is into *Public* and *Private*: the latter denoting the various laws which influence the health of *individuals*; and the former, of *communities*. On the present occasion, your Committee, passing over the subject of *Private Hygiene*, which has received of late years far more consideration than the other division of the subject, respectfully invite your attention to a few facts and suggestions in relation to what a late writer calls *The Political Economy of Health*. We will glance, in the first place, at the history of the subject, and ascertain what progress THE OLD WORLD has made in Sanitary Science: we will afterwards inquire whether everything has been accomplished in behalf of the cause that could be, in THE NEW.

HYGIENE, however much or long it may have been neglected in comparison with other departments of medical science, may still be said to date farther back than medicine itself. From the earliest period of the history of the world, "down through the patriarchal ages, there is evidence that the preservation of health was inculcated as one of the primitive duties. The sanitary laws revealed to the Jews constituted a part of their religion. The regulations for cleanliness, purification, protection from contagious diseases, and for the general preservation of health, are said to have been well adapted to the country in which they lived, and are still observed by the Arabs in that climate.

"The advantages of public health were known in many of the cities of Greece, at the height of her civilization. The Spartans paid great attention to the physical education of young men and young women, and trained them to temperance, sobriety and athletic exercises. Plato and Aristotle thought that no city could exist without

health officers; and Epaminondas, Demosthenes and Plutarch served in that capacity. Hippocrates considered a knowledge of the causes of disease essential to the physician; and is said to have devoted a great part of his life to exploring the islands of the Grecian seas, and of the Archipelago, in relation to the subject of the health of the inhabitants. His life was spent in tracing nature and in observing and recording facts as interpreted by her. Hence the immortality stamped upon his name and writings.”\*

“But” (says a writer in *The Edinburgh Review*) “the Romans were the most sagacious and extensive legislators in such matters. They were in many things masters of the practical; and have left vestiges still pregnant with the wisdom of experience. With them, nothing seems to have been deemed ‘common or unclean’ that could protect the public health. We find Pliny writing to Trajan about a fetid stream passing through Amastris, as if it were an affair of state. The cloacæ of the Tarquins are still among the architectural wonders of the world. The arrangements for supplying the houses of Rome with water were most minute: while those for ventilation and drainage, still traceable in the several remains of Roman amphitheatres, have struck our most advanced sanitarians with surprise at their remarkable adaptation to their purpose. Indeed, it is easy to see that the rules and operations for the protection of health in Rome, were of a very radical and peremptory character, and allowed no minor interests to interfere with them. It seems to have been a rule with them, that from the time when the foundation of a city was laid, to that of the summit of its greatness, no structural operation, public or private, should be permitted to take a shape which might render it a harbor either for disease or crime.”

“The cause of public health received a fatal check when Rome fell; what was previously known, perished in the general wreck of civilization. It does not appear that any sanitary regulations existed from the seventh to the fourteenth centuries. In those ‘dark ages,’ the people lived without rule of any kind; and consequently, frightful epidemics often appeared to desolate the land.”† And since that period, few subjects have made so slow and so little progress as the science of public health, notwithstanding the antiquity of its origin: indeed, the history of our subject is almost an entire blank from the fourteenth to the commencement of this present nineteenth century, when the first permanent *Council of Health* was established in the

\* Lemuel Shattuck.

† Ibid.

city of Paris. From this time forward the subject of sanitary improvement has steadily increased in importance and interest until it has now become one of the greatest questions of the age.

The services of this Council of Health at Paris are rendered gratuitously: still it has always been considered a high honor to belong to it. It was at first composed of four members, but it now numbers twenty-six. Men of the highest consideration appear to have sought a part in its labors, which are so highly appreciated by the government that the decision of the council upon matters submitted to it, are seldom if ever reversed. Many of its reports—which relate to three great divisions, *health*, *salubrity* and *industry*—required in their preparation an unusual amount of labor and scientific research; and when we add that the number of these reports averages eight every week, we may form some idea of the immense amount of gratuitous service which has been performed by this council.

Councils of Health, similar to that of Paris, were established in Nantes in 1817; in Bordeaux soon after; in Lyons in 1822; in Marseilles in 1825; in Lisle in 1828; in Rouen in 1831; and other large cities followed their example. The important results derived from the investigations of these councils stimulated the labors of private individuals, and a large number of interesting and valuable works has since been published in relation to this subject. In consequence of these works, and of the example of England and other governments in the cause of public health, an ordinance was passed on the 18th of December, 1848, for a general health regulation throughout the French Republic; in accordance with which, a Council of Public Health has since been permanently established in each of the 363 *arrondissements* of France, with duties and obligations minutely specified in all their wide and varied details. The city of Paris has special regulations "for the protection of public health."\*

In the German and Prussian States, systems of sanitary and medical police exist in great perfection, and have been applied more extensively to society than in any other parts of the world. And in all the governments on the continent of Europe, laws exist by which every birth, every marriage, and every death which take place are recorded—these records being compulsory and universal.†

In Great Britain, the sanitary welfare and improvement of the people seem to have attracted very little attention until within the last twenty-five years. Boards of Health had existed in many cities,

\* Lemuel Shattuck.

† Ibid.

but they were generally void of much vitality. To Edwin Chadwick, Esq., of the Inner Temple, barrister-at-law, the cause of sanitary improvement is, perhaps, more indebted than to any other man. This subject appears to have been "the ruling thought of his life" since the year 1828. From that time to this, no one has labored more efficiently than he, through sanitary commissions and the public press.

Dr. T. Southwood Smith, Professor in the London Fever Hospital—another individual who has been prominent in all the sanitary movements—called the public attention to the causes of fever, in his treatise on that subject, in 1830, and subsequently published a valuable work on the Philosophy of Health.\*

The most important sanitary measure ever adopted in England was the "Act for the Registration of Births, Marriages, and Deaths, in England and Wales," which went into operation on the 1st of July, 1837. This act was brought into parliament by Lord John Russell, and supported by Lord Morpeth (now Earl of Carlisle), the late Sir Robert Peel, and other distinguished members. Under the operation of the system which this act established, "a mass of statistics, relating to life, health, and disease, has been accumulating, which will exert, and is exerting, an immensely beneficial influence upon the physical and moral welfare of the population." The Quarterly Reports of the Registrar General are regarded as of the highest authority—presenting, as they do, a true picture of the present condition of the country and nation, based on "those unerring indices, marriages and deaths." As respects this law, England is divided at present into 11 divisions, 623 districts, and 2,189 sub-districts, from each of which returns are made with so great regularity that it seldom happens that a single one is missing. The deaths by each disease are shown, the prevailing epidemics recorded and exhibited, and every one is traced, from its origin to its termination.

In 1844 and 1845, *Health-of-Towns Associations* were organized in London, Liverpool, and all the principal towns in England, so powerfully had the subject of sanitary improvement seized upon public attention; and on the 31st of August, 1848, the great sanitary measure which had previously been introduced into parliament by Lord Morpeth (now Earl of Carlisle) became a law, under the title of "*An Act for Promoting the Public Health.*" Under this act a GENERAL BOARD OF HEALTH has been organized, consisting of the Earl of Carlisle, Lord Ashley, Edwin Chadwick, Esq., and Thomas Southwood

\* Lemuel Shattuck.



Smith, M.D. It is needless to add, that the more recent ravages of the Asiatic cholera have still further stimulated public interest in the cause of sanitary improvement, and demonstrated its importance.

A careful analysis of the various sanitary documents and works which have so far appeared in England (according to Mr. Lemuel Shattuck) completely establishes the truth of the following conclusions :—

1. That the annual mortality in the whole of England averages 1 in 44; in the most healthy district, 1 in 65; and in the most unhealthy, 1 in 27.

2. That in all parts of the kingdom we can trace the various forms of disease caused by *atmospheric impurities, decomposing substances, damp and filth, and crowded dwellings*, just as surely as such conditions prevail.

3. That disease and mortality fall more heavily upon the town than the country, and particularly upon those who live in *narrow streets, confined courts, damp dwellings, close chambers, undrained, unventilated, and uncleansed cellars*, affecting most severely the infantile portion of the population, and the heads of families between 20 and 30 years of age.

4. That, in such situations, the average duration of life is 5 to 25 years less than it might otherwise be; and that, during this curtailed period of existence, the working power of those who live, and their capacity for enjoyment, are greatly diminished by a constant depression of health and spirits, and by the active attacks of *fever, cholera, scrofula, and consumption*.

5. That the frequency and intensity of the diseases above specified *may be abated by means of drainage, proper cleansing, better ventilation, and other means of diminishing atmospheric impurity*; and where the removal of the noxious agencies and other causes of disease appears to be complete, *such diseases almost entirely disappear*.

6. That the annual mortality might be reduced in the whole kingdom from 1 in 44 to 1 in 50; and, in all large towns, as low as that general average.

7. That this unnecessary excess of mortality above 2 per cent., occasions an annual loss of more than 50,000 lives in the United Kingdom—"greater than the loss from death or wounds in any wars in which the country has been engaged in modern times;" and that the causes of these unnecessary deaths occasion *at least twenty cases of UNNECESSARY sickness, on the average, to each death, or one million cases annually, which might have been PREVENTED*.



8. That of the 43,000 cases of widowhood, and 112,000 cases of destitute orphanage, relieved from the poor rates of England and Wales alone, the greater proportion of deaths of the heads of families occurred *from specified removable causes*; and that the average of their ages was under forty-five years, or thirteen years below the natural probability of life, as shown by experience.

9.—That the *preventable* causes of disease, and the *unnecessary* mortality, impose upon the people immense pecuniary burdens which might be avoided.

10.—That the younger population, bred up under noxious physical agencies, is inferior in physical organization and general health, to a population preserved from such agencies; and that these adverse circumstances tend to produce an adult population, short-lived, improvident, reckless, immoral, and intemperate.

So much for the progress of SANITARY SCIENCE abroad: on glancing nearer home, we regret to say, that we can find but few materials for a corresponding sketch. Outside of our commercial cities, where quarantine regulations were early established, as a matter of necessity, the subject does not appear to have attracted much attention, until within the last ten years. Not a single State in the Union, to the best of our knowledge (excepting, perhaps, New York and Massachusetts), has in actual operation an efficient system for the registration of births, deaths, and marriages; without which little, if anything, can be accomplished in the way of sanitary improvement, because we cannot dispense with the knowledge which such statistics afford. A few years ago, an effort was made to establish such a system in this State (New York), by legal enactment, but with less success than it deserved. The number of *deaths* is pretty well ascertained in the different large cities—especially in our own metropolis (New York city), where no burial can take place, unless a physician's certificate specifying the cause of death, etc., has been previously procured by the sexton or undertaker, who, in turn, is compelled by law to register a copy of every such certificate in the office of the City Inspector. The *births* and *marriages* in this State are not registered (we regret to add) with equal precision: and we presume they are not registered in any other State (Massachusetts excepted) much more accurately. A new law relating to registration was enacted in Massachusetts on the 30th of May, 1849; and we are glad to learn, on the authority of Lemuel Shattuck, that "it is becoming more and more popular," though, he adds that "a few important improvements should be made in its administration and execution."

The census of the United States, taken during the year 1850, will undoubtedly afford us, when its results are made public, a vast amount of useful information on almost every single subject of national interest. When we know the exact number of the population of the United States, we have a fair basis to work upon as good Sanitarians; but this is not all we wish to know; we must have, in addition, an exact knowledge of the marriages, births, and deaths; to the end that we may ascertain accurately the exact condition of the public health in all parts of the Union. The following extract from the Quarterly Return of the Registrar General, in England, for April, 1850, will show some of the purposes to which such information as this could be applied:—"While the returns of the exports, imports and revenue furnish good indications of the productions, consumption and commerce of great classes in the country, the marriages, births and deaths supply a surer test of the condition of the whole population. It is gratifying to find that the general results of both classes of returns are favorable. The marriages, which in 1847 were so much depressed, and increased almost imperceptibly in 1848, rose to 141,599 in the year 1849; and in the autumn quarter were 43,632, which is a higher number than has ever before been celebrated, excepting in the autumn quarter of 1845. The deaths have also declined; they were 98,607. The country—which, after the failure of the potato crop, in 1846, was covered with funerals, in the train of a multitude of diseases, and of two great epidemics, the fatal influenza of 1847–8, and the more deadly cholera of 1849—is now in health again. The deaths in the first quarter of 1850 were less by 21,065 and 21,414, than the deaths in the corresponding quarters of 1847 and 1848. Fewer children have been left fatherless; fewer parents have been bereaved of their children." Sicknes and suffering—though perhaps not precisely in the same ratio as the mortality—have diminished. The skillful and active industry of the kingdom has been less interrupted by the illness of workmen and the incapacity of masters; the parishes have fewer poor to relieve; the friendly societies fewer sick members to support; insurance societies less to pay on policies; everything dependent on the duration of human life has been relieved of pressure; the minds of the people have not been irritated by hunger, fever and discontent."

In this connexion, your Committee take pleasure in paying a just tribute to the recent *Report of the Sanitary Commissioners of Massachusetts*, and to its estimable author Mr. LEMUEL SHATTUCK, of Boston,

the head of the commission. In the opinion of your committee, this document is one of exceeding interest and value, and the example of Massachusetts in authorizing such a commission is worthy of being followed by every State in our Union. Mr. Shattuck's *Report* (which was presented to the Legislature of Massachusetts on the 25th of April, 1850) commences with a very well-written account of the progress of the cause of Sanitary Improvement both abroad and at home (to which, by the way, we cheerfully acknowledge our own indebtedness for valuable assistance in the preparation of this *Report*). It then proceeds to recommend a *Plan for a Sanitary Survey of the State*. The measures constituting this plan are fifty in number, and are substantially as follows:—The commissioners recommend a thorough revision of the health laws of the State; the formation of a General Board of Health with a competent Secretary, and also of a Local Board of Health in every city and town, with suitable officers; an alteration of the constitution of the State, so that the next State census (instead of being taken in the same year as the United States census, as heretofore) shall be taken in 1855, and at the end of every subsequent period of ten years: it being one object of the proposed census (under the new arrangement) to ascertain the sanitary condition of the commonwealth; the establishment of a more perfect system of registration of both deaths and marriages; a suitable provision for obtaining observations of the atmospheric phenomena on a systematic and uniform plan, at different stations in the commonwealth; the adoption of a uniform nomenclature for the causes of disease and of death; ample provision, in laying out new towns and villages, for a supply, in purity and abundance, of LIGHT, AIR and WATER; for drainage and sewerage, for paving and for cleanliness; a more strict attention to health in the erection of school houses, churches and other public buildings—particularly as regards their site, structure, heating apparatus and ventilation; the prevention or mitigation of the sanitary evils which arise from over-crowded lodging-houses and cellar-dwellings; the reservation of open spaces in cities and villages for wide streets and public squares—both to be ornamented with trees; special sanitary surveys of particular localities; the exact observation of the effect of mill-ponds and stagnant water upon the health of the neighboring inhabitants; periodical house-to-house visitations for sanitary purposes; the investigation of the causes of sickness in general, sickness in schools, and especially of *consumption*; the abatement of nuisances endangering human life and health; the

prevention or mitigation of the sanitary evils of *Intemperance*; a revision of the laws relating to coroner's inquests, as well as those relating to insane and idiotic persons, with a view to giving some control in suitable cases to the Boards of Health, hereafter to be established; the proper regulation of interments, so as to show a becoming respect for the dead, and at the same time protect the health of the living; the more perfect preservation of the lives and the health of seamen and of passengers at sea; the transfer of control over quarantine regulations to the Boards of Health; the prevention or mitigation of the sanitary evils arising from foreign emigration; the formation of sanitary associations in all parts of the State; the erection of better lodging-houses for the poor; the establishment of public bathing-houses and wash-houses in all cities and villages; the prevention of the sale and use of adulterated food, drink or medicine; the education of nurses for the sick; a system of family registration; and a more thorough instruction of the young in everything pertaining to physiology and hygiene. All of these measures the commissioners advocate with a most commendable zeal, because—as they prove by unanswerable arguments—they are practical, useful, economical, philanthropic, charitable and moral; because they involve an important duty, and are imperatively demanded by the progress of the age. The commissioners then proceed to answer the common objections made to such plans in minute detail—namely: that they are “too complicated;” that they are “not applicable to our people;” that they are “too statistical;” that they “interfere with private matters, rights and interests;” that they “create an unnecessary expense;” that they “promote quackery, alarm the people and interfere with Providence;” and lastly, that “the people have not time to attend to it.” All of these objections are shown to be frivolous, short-sighted and absurd. The Report concludes with a powerful appeal, in behalf of the subject of Sanitary Improvement, to physicians, clergymen, educated men of all classes, the wealthy and the philanthropic, the people at large, the periodical press, to towns and cities, and finally, to the commonwealth of Massachusetts. For instance, they say: “The Sanitary reform we advocate, is not like some of the popular reforms of the age. It rests upon no visionary theories, conceived alone in the closet, or by some impracticable enthusiast. It aims at the establishment of no abstract principle, with no definite, practical bearing or application. It is not radical in its character or tendency; does not seek to overturn nor upturn any social, political, or religious sentiment, or institution,

nor abrogate any constitutional or statute law ; it interferes with no man's rights, pecuniary, social, political or religious. But it takes things as they are ; looks upon man as it finds him ; allows him to enjoy the institutions with which he is favored, *and gives him the means of living longer, and of enjoying more while he does live.* There is in this no transcendentalism, or other *ism* or *ology*, to which any reasonable objection can be made ; though it transcends in its simplicity, in its practical utility, and its substantial, everyday, universal benefits, all other reforms. Every person, in every station, can do something to promote this reform ; and every such effort, wisely directed, will increase the amount of his own individual enjoyment, and add to the aggregate enjoyment of the people."

In conclusion, your Committee would respectfully urge every member of this Association to interest himself in the cause of *Public* as well as of *Private Health*, not only in his own town or village, but in his own county, district, section, and State ; and, in fine, in the whole UNION. Let each and all labor assiduously, in the collection of useful facts and information, and in their wide and general diffusion and publication. Our constitution has made this one of the two cardinal objects of our society : it has ever assigned it a preference over the other ; and your committee are confident that, the more it is contemplated the more will the cause of SANITARY IMPROVEMENT commend itself to the benevolent, the reflecting, and the enlightened, as one of the noblest of the many which mark the times in which we live. "Ignorant men" (says Dr. Simon, the Health Officer of London) "may sneer at the pretensions of Sanitary Science ; weak and timorous men may hesitate to commit themselves to its principles, so large in their application ; selfish men may shrink from the labor of change which its recognition must entail ; and wicked men may turn indifferently from considering that which concerns the health and happiness of millions of their fellow creatures ; but in the great objects which it proposes to itself, in the immense amelioration which it proffers to the physical, social, and indirectly to the moral condition of an immense majority of our fellow creatures, it transcends the importance of all other sciences, and in its beneficent operation seems to embody the spirit, and to fulfil the intentions, of practical Christianity."

*In behalf of the Committee,*

ROLAND S. HOUGHTON, M.D.,

*Chairman.*



## Appendix.

SINCE the presentation of the preceding paper in Convention, on the 9th of May, the *Annual Report of Dr. A. W. White, the City Inspector, of the number of Deaths and Interments in the City of New-York during the year 1850*, has at last made its appearance from the press. The following citations are made from this document :

The whole number of deaths during the year was 16,978. Deducting 1,533 of still-born, deaths from malformation, old age, and premature births, and also 68 brought from other places for interment we shall have 15,377 deaths from actual disease and casualties. If 645 deaths from murders, suicides and casualties be taken off, the remainder will show the total number of deaths, from disease alone, to be 14,729. Of the whole number of deaths, there were—whites, 16,529 ; blacks, 449. The number of male adults was 3,364 ; the number of female adults was 3,047 ; male children, 5,794 ; female children, 4,773. Total males, 9,158 ; total females, 7,820. Total adults, 6,411 ; total children, 10,567. Of the foregoing, there were born in the United States, 11,715 ; Ireland, 3,382 ; Germany, 812 ; England, 440 ; Scotland, 147 ; and France, 80 ; in places unknown, 203. In Ward's Island there were 892 ; Bellevue Hospital, 595, and City Hospital, 392. In Roman Catholic cemeteries there were interred 5,925 ; in Potter's Field, 3,023 ; making, together, more than half the entire number.

The few deaths reported from *Asiatic Cholera* during the year 1850, occurred chiefly amongst newly arrived immigrants, and were thus distributed through the year ; January, 1 ; February, 45 ; March, [at the Immigrants' Refuge, Ward's Island,] 3 ; June, 2 ; July, 6 ; total 57. [Total number of deaths from Asiatic Cholera in 1849, 5,071.]

### Comparative Statement of Number of Deaths from Diseases of Same Class as the Cholera.

|                                    | 1849. | 1850. |
|------------------------------------|-------|-------|
| Cholera Infantum, . . . . .        | 1,926 | 713   |
| Cholera Morbus, . . . . .          | 211   | 44    |
| Diarrhœa, . . . . .                | 783   | 343   |
| Dysentery, . . . . .               | 1,256 | 792   |
| Typhoid Fever, . . . . .           | 187   | 76    |
| Inflammation of Bowels, . . . . .  | 531   | 433   |
| Ulceration, . . . . .              | 25    | 19    |
| Inflammation of Stomach, . . . . . | 156   | 137   |
|                                    | 5,105 | 2,557 |

A decided decrease in mortality also appears from the following statement :

|                                                |        |
|------------------------------------------------|--------|
| {Deaths from <i>Ordinary</i> Diseases in 1848, | 14,226 |
| “ “ “ “ “ 1849,                                | 16,670 |
| “ “ “ “ “ 1850,                                | 14,672 |

Thus it appears that the increase in mortality during two years (comparing 1848 and 1850) has only been 446, notwithstanding the increase of population and of immigration.

*Table showing the Ratio of the Number of Deaths to that of the Population every Fifth Year since 1805.*

| Year. | Deaths  | Population. | Ratio.      |
|-------|---------|-------------|-------------|
| 1805, | 2,297,  | 75,770,     | 1 to 32,98, |
| 1810, | 2,073,  | 96,373,     | 1 to 46,49, |
| 1815, | 2,405,  | 100,619,    | 1 to 41,83, |
| 1820, | 3,326,  | 123,706,    | 1 to 37,19, |
| 1825, | 4,774,  | 166,086,    | 1 to 34,78, |
| 1830, | 5,198,  | 202,589,    | 1 to 38,97, |
| 1835, | 6,608,  | 270,089,    | 1 to 40,87, |
| 1840, | 7,868,  | 312,710,    | 1 to 39,74, |
| 1845, | 9,886,  | 371,223,    | 1 to 37,55, |
| 1850, | 15,377, | 515,394,    | 1 to 33,52. |

In commenting upon the apparent increase in the ratio of mortality upon comparing the ratio for 1850 with that for any other year in the foregoing table, the City Inspector very justly observes that we ought to take into account these facts: that, within the last five years, nearly 100,000 of our most healthy citizens (viz, those who live neatly and comfortably) have removed to Brooklyn, Williamsburg and other places adjacent to the city—the heads of the families still doing business during the day in the city; while those least protected from disease always remain in our midst. Besides all this, the foreign alms-houses are emptied into our city; and the thousands of immigrants who seek the West, leave their sick from ship-board to die in our midst and infect our own population; and those who become diseased within the first three years after their arrival (during which time the city is chargeable with their support) are sent back daily to die in our institutions from all parts of the country.

*Comparative Mortality of Children and Adults during the last Four Years.*

|                 | Children. | Adults.              |
|-----------------|-----------|----------------------|
| Deaths in 1847, | 8,423,    | 7,071,               |
| “ “ 1848,       | 8,889,    | 7,021,               |
| “ “ 1849,       | 12,028,   | 11,745,              |
| “ “ 1850,       | 10,567,   | 6,411,               |
| Total Children, | 3912,     | Total Adults 32,248, |

During the year 1850, 6 persons died aged over 100 years; 18 over 90; 207 over 80; and 510 aged upwards of 70.

*Table of Comparative Mortality from a few of the Principal Causes of Death for the last Six Years.*

| Disease.                   | 1845. | 1846. | 1847. | 1848. | 1849. | 1850. |
|----------------------------|-------|-------|-------|-------|-------|-------|
| Apoplexy,                  | 383   | 400   | 445   | 421   | 562   | 572   |
| Cholera Infantum,          | 563   | 527   | 692   | 505   | 926   | 713   |
| Convulsions,               | 771   | 879   | 1023  | 1193  | 1426  | 1288  |
| Croup,                     | 220   | 190   | 271   | 319   | 292   | 356   |
| Debility,                  | 140   | 199   | 515   | 396   | 484   | 343   |
| Diarrhœa,                  |       |       | 588   | 432   | 783   | 473   |
| Inflammation of Lungs,     | 753   | 573   | 748   | 708   | 926   | 924   |
| Measles,                   | 137   | 17    | 275   | 77    | 125   | 324   |
| Marasmus,                  |       |       | 688   | 680   | 764   | 746   |
| Scarlet Fever,             | 63    | 114   | 142   | 93    | 266   | 311   |
| Small Pox.                 | 425   | 141   | 53    | 544   | 326   | 231   |
| Whooping Cough,            | 89    | 214   | 86    | 213   | 112   | 180   |
| Cholera Morbus,            | 19    | 34    | 44    | 43    | 241   | 44    |
| Consumption,               | 1659  | 1698  | 1926  | 1869  | 2086  | 1928  |
| Delirium Tremens,          | 81    | 80    | 137   | 104   | 110   | 80    |
| Dysentery,                 |       |       | 657   | 739   | 1256  | 792   |
| FEVER, Typhus and Typhoid, | 174   | 256   | 1396  | 943   | 602   | 472   |
| Congestion of Lungs,       |       |       | 70    | 125   | 139   | 202   |

The relative mortality from Diseases of the Lungs is not so great in the City of New-York as in the neighboring country, or the sea-side cities of the Eastern States. Thus, in Boston, last year, it was 26 per cent., whilst in our city the mortality from diseases of the digestive system is far greater.

The mortality from *Consumption* was 158 less than in 1849; only 59 more than in 1949; and 2 more than in 1847. There is little difference in the monthly number of deaths from this cause; only a few more being carried off during the coldest and hottest months. As respects age, we find scarcely any died younger than 20 years of age; between the ages of 20 and 30, there were 563 victims, or 7-25 of the whole number; from 30 to 40, about 5-25; and from 40 to 50, 3-25 of the whole. This proportion corresponds, very nearly, with that of previous years.

It is worthy of remark, as showing one of the blessings resulting from the introduction of the Croton Water, that only one death from stone, and six from drinking cold water, have occurred during the last four years, while the number of deaths from those causes, previously, amounted to from 30 to 50 per annum.

Our exemption from diseases of the urinary organs (adds the City Inspector) is a blessing we owe to the recent introduction of good water. In many Northern and Western cities, the deaths from this cause amount to nearly one per cent.

New York is as healthy as any large city in the world,—St. Petersburg, perhaps, excepted. Observations on the hygrometric, thermometric, barometric, and electrical state of the atmosphere, demonstrate the existence of those conditions which are generally recognized as constituting a healthy climate. We possess great natural advantages for cleanliness and pure air, being almost surrounded by wide and clear flowing streams. A river of pure water is conveyed under ground to our doors; good, healthy food, generally obtainable by all; and most of our inhabitants have the opportunity of sufficient healthy exercise.

*Nuisances.*—The “bone and flesh-boiling establishments” have been, as nearly as possible, rooted out, and the offensiveness of manure heaps has been to some extent abated. On the subject of filthy streets, the City Inspector earnestly invites the action of the Common Council, as he very justly observes, “neither heat of weather, nor bad food, nor bad water, nor teething, nor disease of the alimentary canal, will, either singly or combined, produce *cholera infantum* (which last year cut off more than 700), unless a vitiated atmosphere is added.” Finally, the City Inspector recommends the enactment of laws *prohibiting building upon the rears of lots already built upon in front*, for the purpose of preventing the letting of *cellars*, and houses in bad condition, for lodgings; and also of preventing the letting of ill-ventilated houses to more than a stated number of persons. (Such laws are now in force in Liverpool and other British towns.) A great many persons (according to the City Inspector), either through ignorance or disregard of the laws of health, prefer, in order to be near their work, to live in these pens and barracks, surrounded by filth and bad air, rather than walk a mile or two to find a more cleanly and healthy abode.

*Sanitary Survey of the City of New York.*—During the year 1850, a systematic sanitary survey has been instituted. Under its operation, every house is now visited and inspected twice in every year; the uses to which it is applied, its size, number of rooms, families and persons residing therein; their means of ventilation; the condition of yards, cellars, etc., and the name of the owner or responsible agent, are all recorded, and systematically arranged for reference, in books kept for that purpose in the City Inspector’s office. This survey is ready to be used as a powerful engine in the sanitary reform of the city. For instance, should it happen that a remarkable

number of deaths from a particular disease occur in a certain locality, a reference to the books will, perhaps, quickly enable the City Inspector to judge of the cause, after which it may be very easily removed. In the same manner, a nuisance which is complained of may be removed in a much shorter time than by the usual method.

Physicians and statisticians, on the subject of mortality, compute that more than one-third of the mortality of all large cities might be *prevented*. Thus, the loss last year of more than 5,000 of our citizens, and of more than \$10,000,000, might have been prevented, had the laws of life and health, the causes of disease and means of prevention, been better known and more faithfully observed.

*Births and Marriages.*—The law for the registration of these continues to be a dead letter. There is no doubt of the importance of keeping a perfect record of them, in a sanitary point of view. In neighboring cities, these records have been kept for many years with great advantage.

*Comparative Mortality of New York and Other Cities.*—The ratio of mortality to the population is much smaller in New York than in any large European city,—St. Petersburg, perhaps, excepted. This fact foreign statistics admit, and the premiums of foreign life insurance companies are graduated in accordance with it. The proportion of the inhabitants dying annually in the great cities of Europe is set down at 1 to 21 of the population, and in cities of moderate size at 1 to 27; whereas New York exhibits for the last ten years a mortality of about 1 to 36, and, including Brooklyn and Williamsburgh, only 1 to 40.

*Approximate Table of Ratio of Mortality to Population in 1850.*

|                                                           |         |
|-----------------------------------------------------------|---------|
| Providence, R. I., . . . . .                              | 1 to 47 |
| Lowell, Mass., . . . . .                                  | 1 " 65  |
| Fall River, Mass., . . . . .                              | 1 " 66  |
| Boston, Mass., . . . . .                                  | 1 " 38  |
| New York, including Williamsburgh and Brooklyn, . . . . . | 1 " 38  |

*Approximate Table of Comparative Average Age at Death, &c.*

|                                                          |       |
|----------------------------------------------------------|-------|
| Average age of all who died in Boston in 1845, . . . . . | 21.43 |
| " " " " 1850, . . . . .                                  | 21.06 |
| " " New York, 1845, . . . . .                            | 20.78 |
| " " " " 1850, . . . . .                                  | 20.67 |
| " " Philadelphia, 1845, . . . . .                        | 21.85 |

[We cannot make such tables, however, perfectly reliable, for want of a register of births and of immigration, from which we could ascertain what proportion of our population is *fluctuating*, and what proportion is *stationary*.]

R. S. H.

